FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours per respon	se16.00					

1112/11/

SEC USE ONLY								
Preflx		Serial						
DATE RECEIVED								

Name of Offering (check if this is an amendment and name has changed, and	id indicate change.)
Membership Interests Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule Type of Filing: New Filing Amendment	le 506 Section 4(6) ULSEC Mall Processing Section
A. BASIC IDENTIFIC	CATION DATA MAY 127008
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and in	indicate change.) Washington, DC
ALD Co-Investor, L.L.C.	112
	City, State, Zip Code) Telephone Number (Including Area Code)
c/o Harbert Venture Partners MM, LLC 1210 East Cary St, St 400, Rich	hmond, VA 23219 205-987-5741
	, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)	OCESSED
Brief Description of Business	9 -
an entity formed to invest in pharmaceutical companies	AY 2 0 2008
Type of Business Organization limited partnership, alread	ISON REUTERS (please specify):
business trust limited partnership, to be formed	Limited Liability Company 08048330
Month Year	
Actual or Estimated Date of Incorporation or Organization: O 4	
GENERAL INSTRUCTIONS	الما البا
Federal: Who Must File: All issuers making an offering of securities in reliance on an exempti 77d(6).	tion under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of sa and Exchange Commission (SEC) on the earlier of the date it is received by the SEC which it is due, on the date it was mailed by United States registered or certified m	EC at the address given below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W.	V., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of photocopies of the manually signed copy or bear typed or printed signatures.	f which must be manually signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amer thereto, the information requested in Part C, and any material changes from the information be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Ex ULOE and that have adopted this form. Issuers relying on ULOE must file a set are to be, or have been made. If a state requires the payment of a fee as a preco accompany this form. This notice shall be filed in the appropriate states in account this notice and must be completed.	eparate notice with the Securities Administrator in each state where sales condition to the claim for the exemption, a fee in the proper amount shall cordance with state law. The Appendix to the notice constitutes a part of
	ION ————————————————————————————————————
Failure to file notice in the appropriate states will not result in a loss of an available stating of a federal notice.	loss of the federal exemption. Conversely, failure to file the state exemption unless such exemption is predictated on the

A BASIC IDENT	IFICATION DATA		
2. Enter the information requested for the following:			
• Each promoter of the issuer, if the issuer has been organized within	the past five years;		
Each beneficial owner having the power to vote or dispose, or direct to	 the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corp	 orate general and man	aging partners of p	partnership issuers; and
Each general and managing partner of partnership issuers.	_	,	•
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Harbert Venture Partners MM, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code) 1210 East Cary Street, Suite 400, Richmond, Virginia 23219			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) MarRay Venture II, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code) 2100 Third Avenue North, Suite 600, Birmingham, Alabama 35205			
	<u> </u>		
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) McWane Salaried Pension Plan			
Business or Residence Address (Number and Street, City, State, Zip Code)			
1927 First Avenue North, 9th Floor, Birmingham, Alabama 35203			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
(Use blank sheet, or copy and use add	tional copies of this s	heet, as necessary)	

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Yes No Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? Yes No				·····		. R I	NFORMATIO	N AROLE	COFFERI	NG .		:	· ·.	
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?	L_			·	· · · · · · · · · · · · · · · · · · ·	70, 1		ADOU	, orronn		<u> </u>		Yes	No
2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of Securities in the offering If a person to be listed is an associated person or agent of a brock or of dealer, you may set forth the information for that brocker or dealer, you may set forth the information for that brocker or dealer, you may set forth the information for that brocker or dealer, you may set forth the information for that brocker or dealer, you may set forth the information for that brocker or dealer, on the or dealer, you may set forth the information for that brocker or dealer are associated persons of such a broker or dealer, you may set forth the information for that brocker or dealer are associated persons of such a broker or dealer, you may set forth the information for that brocker or dealer are associated persons of such a brocker or dealer, you may set forth the information for that brocker or dealer are associated persons of such a brocker or dealer, you may set forth the information for that brocker or dealer only. Full Name (Last name first, if individual) States) All States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check: "All States" or check individual States) All States All AR AZ AR (CA CD CT DE DC FL GA HI ID MAY INT NAME I	1.	Has the	issuer sold	, or does th	ne issuer ir	ntend to se	ll, to non-acc	redited is	nvestors in	this offeri	ing?			X
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer right or agent of a broker or dealer gown any set forth the information for that broker or dealer gown any set forth the information for that broker or dealer gown any set forth the information for that broker or dealer a sosciated persons of such a broker or dealer, you may set forth the information for that broker or dealer and street or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, which is provided the solicit person broker or dealer. Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI STATES (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI STATES (Check "All States" or check individual) Dusiness or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES ALL AK AZ AR CA CO CT DE DC FL CA HI DD STATES ALL AK AZ												0.00		
3. Does the offering permit joint ownership of a single unit?	2.	What is	the minim	um investm	ent that w	ill be acce	pted from any	individ	ual?	•••••				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation or purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer gistered with the SEC and/or with a state or states, list the name of the broker or dealer, if more than five (5) persons to be listed are associated persons of such a broker or dealer, so may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3.	Does th	e offering p	permit joint	ownershi	p of a sing	gle unit?							
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) NA Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, MT, NE, NV, NHI, NH, NM, NM, NM, NM, NM, NM, NM, NM, NM, NM	4.	Enter th	e informat	ion request	ed for eac	h person v	who has been	or will b	e paid or g	given, dire	ctly or ind	irectly, any		
or states, list the name of the broker or dealer. It more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) NA Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] AK AZ AR CA CO CT DE DC FL GA HI ID MAI MI MN MS MO MT INE INV INH NJ INM INV INC IND DH DK OR PA INTENDITY INTENDIT														
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1.	Enter the aggregate offering price of securities included in this offersold. Enter "0" if the answer is "none" or "zero." If the transaction this box and indicate in the columns below the amounts of the sealready exchanged.	on is an exchange offering, check		
	•		Aggregate	Amount Already
	Type of Security		ffering Price	Sold
	Debt	s_	5,000,000.00	\$_5,000,000.00
	Equity	\$_		\$
	☐ Com	non Preferred		
	Convertible Securities (including warrants)	ļs_		s
	Partnership Interests	<u> </u>	·	s
	Other (Specify)	\$_		<u>\$</u>
	Total			\$ 5,000,000.00
	Answer also in Appendix, Column 3, if filing un	der ULOE.		
2.	Enter the number of accredited and non-accredited investors who offering and the aggregate dollar amounts of their purchases. For the number of persons who have purchased securities and the purchases on the total lines. Enter "0" if answer is "none" or "ze	offerings under Rule 504, indicate aggregate dollar amount of their		Aggrange
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	6	\$ 5,000,000.00
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			
	Answer also in Appendix, Column 4, if filing			· · · · · · · · · · · · · · · · · · ·
3.	If this filing is for an offering under Rule 504 or 505, enter the infor sold by the issuer, to date, in offerings of the types indicated, in this sale of securities in this offering. Classify securities by type	mation requested for all securities twelve (12) months prior to the		
	Turn of Official		Type of Security	Dollar Amount Sold
٠	Type of Offering Rule 505		•	
	Regulation A			-
	•			¢
	Rule 504			s 0.00
	Total	_	 · 	3_0.00
4	a. Furnish a statement of all expenses in connection with the securities in this offering. Exclude amounts relating solely to org. The information may be given as subject to future contingencies. not known, furnish an estimate and check the box to the left of t	anization expenses of the insurer. If the amount of an expenditure is		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs	<u> </u>] s _
	Legal Fees			5,000.00
	Accounting Fees	<u> </u>] \$
	Engineering Fees	<u> </u>] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)	<u></u>] \$
	Total	1		\$_5,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMI	BER OF INVES	TORS, EXPEN	SES YND OSE OF L	K	CLEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. T	his difference is	the "adjusted gross			\$_4,995,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is no the payments l	t known, furni isted must equa	sh an estimate and			
		•				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees				٦:	\$	□ s
	Purchase of real estate			•			
	Purchase, rental or leasing and installation of mac	hinery					_
	Construction or leasing of plant buildings and fac			•	_		
	Acquisition of other businesses (including the val- offering that may be used in exchange for the asse	ue of securities ets or securities	involved in th	is			_
	issuer pursuant to a merger)		1	-	_		
	Repayment of indebtedness		1	-	_		
	Working capital		 	[\$	S 4,995,000.0
	Other (specify):			[s	. 🗆 \$
			1		_	_	
			<u> </u>		┙	·	
	Column Totals	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[\supset	\$ 0.00	\$ <u>4,995,000.0</u>
	Total Payments Listed (column totals added)	*************	·····	***************************************		\$ <u>_4</u> ,	995,000.00
. :		D. FEDER	AL SIGNATUÌ	RE'	1 1 No		ring a second
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S redited in lesto	Securities and	Exchange Commis	sic	n, upon writte	
SSI	er (Print or Type)	Signature	7	}	Da	te	_
AL	D Co-Investor, L.L.C.		VI) -		5/0/0	B
Na	ne of Signer (Print or Type)		r (Print or Typ				
Vill	iam W. Brooke	Executiv	e Vice Pr	esident of HN	1C	-Virginia	, Inc.,
			ger of Ha	rbert Venture e Issuer	≘ .	Partners 1	MM, LLC,
		—— ATTF	NTION				
	Intentional misstatements or omissions		1	riminal violation	S .	(See 18 U.S.	.C. 1001.)
			1				•

11 11		E. STATI	SIGNA	TURE			
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?					Yes	No X
	See A	Appendix, Colu	mn 5, fo	r state response.			
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required		te admini	strator of any state in wi	nich this notice is fi	led a no	otice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the s	late admi	nistrators, upon written	request, informat	ion furr	nished by the
4.	The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establishing	te in which this	notice is	s filed and understands			
	er has read this notification and knows the content horized person.	nts to be true and	has duly	caused this notice to be	signed on its beha	If by the	undersigned
Issuer (P	rint or Type)	Signature			Date	,	
ALD Co-	Investor, L.L.C.	1	+ 1		5/8	08	b
Name (P	rint or Type)	Title (Print or	Type)				
William	W. Brooke			President of H			
		the Manag	er of	Harbert Venture	e Partners M	M, LL	C,

the Manager of the Issuer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 1 3 4 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Investors No State Yes No Investors Amount Amount Yes 9 \$0.00 AL\$4,533,186.0 × × ΑK ΑZ AR ÇA CO CT DE DC X \$70,771.41 \$0.00 FL 1 0 GA HI ID IL IN lA KS KY LA ME MD MA Μľ MN MS

			<u> </u>	APP	ENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	Type of investor and amount purchased in State (Part C-Item 2)			ification te ULOE attach ation of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV								:	ſ <u>.</u>
NH									
NJ									;
NM									
NY								!	
NC	10 2 5 5 5							=, ;	
ND									
ОН			· ,						
OK			-						. <u> </u>
OR									
PA		×		1	\$193,610.8	0	\$0.00	<u> </u>	×
RI		la acceptant of administration						<u></u>	
SC									
SD	,								
TN						,		<u> </u>	
TX									
UT									J
VT								, , , ,	
VA		×		5	\$202,431.58	0	\$0.00		×
WA									
wv									
WI		<u> </u>							

			· .	APPI	ENDIX				,
Intend to sell to non-accredited investors in State of		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in Stat (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

END